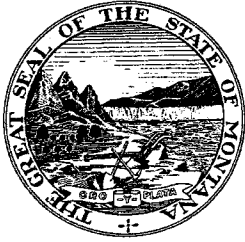


DEPARTMENT OF
PUBLIC HEALTH AND HUMAN SERVICES



Brian Schweitzer
GOVERNOR

Anna Whiting Sorrell
DIRECTOR

STATE OF MONTANA

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February 7, 2011

Representative Don Roberts, Chair
Appropriations Subcommittee
Health and Human Services
State Capitol Building
Helena, MT 59620

Dear Chairman Roberts:

We are responding to questions raised about administration of the Home and Community Based Services (HCBS) Waivers operated by three divisions in the Department of Public Health and Human Services

Question from Representative Caferro: Representative Caferro asked for the Number of waiver slots; the number of individuals served; and the number and position descriptions of DPHHS FTE that perform the preadmission screen for waiver services and oversight of HCBS services, including quality control.

This information is split out for the various HCBS waivers that the Department operates. Position descriptions are attached to this letter.

HCBS elderly and physically disabled waiver in the Senior and Long Term Care Division

1. Number of HCBS waiver slots. This information is also included in the SLTCD presentation material to the subcommittee on Page 4 of the overview.

FY10 = 1890

2. Number of individuals served. This information is included in the SLTCD presentation material to the subcommittee on Page 4 of the overview.

FY10 = 2457

3. Number and position descriptions of DPHHS FTE that perform the following functions:
 - a. Preadmission screen for waiver services

The primary work in terms of preadmission screens is done by Mountain Pacific Quality Health through a contract with the Department. For denials and difficult screens, Regional

Program Officers located in towns across Montana assist with the determination. There are 9.5 FTE who perform this function as part of their job duties. The Regional Program Officer position description is attached to this e-mail.

- b. Oversight of HCBS services, including quality control.

There are currently two full time program managers who administratively manage the HCBS Waiver in Helena. The 9.5 FTE Regional Program Officers mentioned above provide local oversight of HCBS services as part of their job, under the direction of the program managers.

HCBS comprehensive, community supports, and autism waivers in the Developmental Services Division

1. Number of HCBS waiver slots.

FY10 = 2,675 CMS approved unduplicated client count in the 3 DDP HCBS waivers

2. Number of individuals served. This information is also included in the DSD presentation material to the subcommittee on Page 19 & 20 of the overview.

FY10 = 2,671 (snapshot of clients served on June 30, 2010 shown in the bar charts)

3. Number and position descriptions of DPHHS FTE that perform the following functions:
 - a. Preadmission screen for waiver services

Quality Improvement Specialists screen incoming waiver applicants for eligibility. DPHHS, Developmental Disability Program currently employs 21 FTE across the state for determining this eligibility. There is also a position entitled Eligibility and Referral Specialist who performs this function.

- b. Oversight of HCBS services, including quality control.

The 21 Quality Improvement Specialists, previously mentioned, are the primary employees for ensuring waiver requirements are being met via the application of the quality assurance review process. There are also currently two full time Waiver Specialists who administratively manage the HCBS Waiver in Helena.

HCBS Behavioral Health (SDMI) waiver in the Addictive and Mental Disorders Division

1. Number of HCBS waiver slots. This information is included in the AMDD presentation material to the subcommittee on Page 3 of the overview.

FY10 = 120

FY 11 = 155 (approved 7/1/2010)

2. Number of individuals served.

FY10 = 181

3. Number and position descriptions of DPHHS FTE that perform the following functions:
 - a. Preadmission screen for waiver services

The primary work in terms of preadmission screens is done by Mountain Pacific Quality Health through a contract with the Department. For denials and difficult screens,

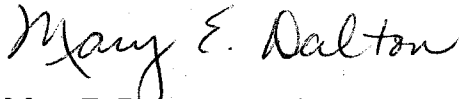
Community Program Officers assist with the determination. There are 4 FTE who perform this function as part of their job duties. The Community Program Officer position description is attached to this e-mail.

- b. Oversight of HCBS services, including quality control.

There is currently one full time program manager who administratively manages the SDMI HCBS Waiver in Helena. The 4 FTE Community Program Officers mentioned above provide local oversight of HCBS services as part of their job, under the direction of the program managers. There is one additional Community Program Officer who assists with annual consumer visits and quality assurance reviews.

Please feel free to contact me at 444-4084 or mdalton@mt.gov if you have any questions.

Sincerely,



Mary E. Dalton, Branch Manager
Medicaid and Health Services Branch

Attachments

cc: Anna Whiting Sorrell
Jon Ebel
Kelly Williams
Bob Runkel
Lou Thompson
Laurie Lamson

STATE OF MONTANA JOB PROFILE AND EVALUATION

The job profile is a streamlined position description and may serve as the core document for all human resource functions such as recruitment, selection, performance management and career and succession planning. It was developed, initially, for use in classifying positions in Pay Plan 020.

If you are converting a position to Pay Plan 020 and the position has not changed simply cut and paste the information needed from the current position description. The position description contains sections that are no longer used to classify the position, such as: Working Conditions and Physical Demands; Management and Supervision of Others; Supervision Received; Scope and Effect; and Personal Contacts. These may still be important to the position and may be included in **Section IV – Other Important Job Information**.

When working with a new position, classification request or change to a position in Pay Plan 020, complete the information below to provide the required documentation for classification.

SECTION I – Identification

Working Title Regional Program Officer		Job Code Number	Job Code Title Human Service Specialist
Pay Band	Position Number	FLSA Exempt <input checked="" type="checkbox"/> FLSA Non-Exempt	
Department Public Health and Human Services		Division and Bureau Senior and Long Term Care Division- Community Services Bureau	
Section and Unit Community Services Bureau		Work Address and Phone 111 North Sanders Helena, MT 59604	
Profile Produced By: James Driggers			Work Phone: 444-4544

Work Unit Mission Statement or Functional Description - This section should include a complete statement of the mission or function as it relates to the work unit.

The mission of the Community Services Bureau is to address the needs of Medicaid eligible Montanans who require assistance and support in meeting their on-going health needs by developing, managing, funding, and ensuring quality in home based services that foster independence and dignity, contain costs, and provide options to consumers. To achieve this mission, the community services bureau is responsible for the management of a cost-effective system of service delivery within the Senior and Long Term Care Division of the Department of Public Health and Human Services. The community services delivery system provides innovative health-related services to individuals who wish to remain in their homes and communities, while recognizing the limitations and risks of the community options chosen. The Community Services Bureau programs serve over 4000 individuals and families. The programs of this bureau are: Preadmission Screening for nursing facilities and Home and Community-Based Services level of care, Home Health, Hospice, Personal Assistance, Home Dialysis and Home and Community Based Services. Service delivery systems to implement these programs are typically located in community-based and tribal agencies, covering all 56 counties and seven reservations.

Describe the Job's Overall Purpose:

The Regional Program Officers serve as the focal point for development and support of a responsive system of health care by meeting the technical assistance needs of individuals and service providers who implement the programs of this bureau. This involves ongoing relationships with local agencies, hospitals, private non-profits, medical providers, and, in certain localities, tribal governments. The Regional Program Officers provide clear and accurate policy direction and guidance to providers; evaluate and analyze regional service delivery; conduct provider compliance audits; evaluate the need for, coordinate and provide necessary provider training; and take appropriate action to ensure correct program policies are being disseminated and clarified at the regional level to ensure adherence to the Administrative Rules of Montana, state and federal law, and program policy.

SECTION II - Major Duties or Responsibilities	% of Time
<p>This section should be a clear concise statement of the position's duties. Well written thorough task duty statements are required here to accurately evaluate the position.</p> <p>1. What are the major duties or responsibilities assigned to this position? Group duties in order of importance and estimate the percent of time needed to perform each duty. NOTE: Because you are identifying major duties usually 3-5, the quantity of time probably will not be less than 20%. If a duty is essential but not performed routinely you should list it. For example, lobbying during the legislative session may not take up a large percent of total work time, but can be an essential duty.</p>	

Program Management and Liaison:

This position performs administrative and management duties as Regional Program Officers of the Community Services Bureau. The incumbent is responsible for regional implementation of a variety of community based health programs. Provides clear and accurate policy direction and guidance to providers; evaluates and analyzes regional service delivery; conducts program compliance audits; evaluates the need for, coordinates, and provides necessary provider training; and takes appropriate action to ensure correct program policies are being disseminated and clarified at the regional level to ensure adherence to the administrative rules of Montana, state and federal law, and program policy.

- A. Oversees bureau programs utilizing a working knowledge of state program policies, mandates, directives and intents; community-based health programs; department and division goals; as well as public relations.
- B. Represents the bureau in division, department, interagency and public interactions with Community Services Bureau or Senior and Long Term Care Division activities.
- C. Serves as department liaison to bureau and division with regard to community services for people who are elderly or disabled and their families.
- D. Provides information on program mission and service goals to providers, contractors and other local agencies.
- E. Represents the Department at fair hearings, as necessary, and conducts administrative reviews related to programmatic appeals.
- F. Implements bureau response to federal and state audit review and programmatic review recommendations.
- G. Represents the bureau at the local level; Meets with advisory councils, task forces, consumer groups and other organizations related to activities of the bureau and/or division.
- H. Provides advice or consultation to groups regarding community based services for people who are elderly or disabled and their families.
- I. In a timely and routine manner informs Bureau Chief of potential problem areas and successes within the bureau.
- J. Reviews program issues with Bureau Chief and staff, utilizing bureau mandates and guidelines, and participates in the development of best practices of community based health management.
- K. Explains program goals and objectives to local providers and contractors, gathers information and proposed strategies to respond to identified needs and how program could be modified to meet those needs.
- L. Directs and participates in focus groups, task forces and committees dealing with health policy affecting persons who are elderly or disabled and their families.
- M. Researches and finds ways to provide needed services to consumers that are not covered by bureau programs.
- N. Prepares and submits routine and ad hoc reports to program managers and central office in a timely manner.
- O. Oversees regional providers of community services programs and contractor advisory councils.
- P. Makes definitive decision regarding difficult preadmission screening determinations.
- Q. Works closely with county eligibility, Adult Protective Services, Area Agencies on Aging and other relevant agency staff on behalf of consumers.

- R. Resolves disputes between providers, consumers and other state agencies.
- S. Follows up on consumer complaints and concerns.
- T. Assists with CSB Conference planning and implementation.
- U. Manages special projects and other duties as assigned.

Quality Assurance

30%

- A. Conducts regional compliance reviews to ensure that services are delivered in accordance with program policy.
- B. Develops effective corrective action activities for deficiencies.
- C. Researches and analyzes ARM's, state policy manuals, directives and other policy clarifications and communicates the information to providers when corrective action is required.
- D. As a result of needed corrective action, conducts specialized training, pre and post payment claims review, prior authorization of claims and other activities specific to the provider's needs.
- E. Collaborates and participates in planning, coordination, operation and monitoring or the State Compliance Review process.
- F. Based on programmatic reviews and evaluations, recommends policy or procedural changes to program managers and bureau chief.
- G. Ensures services meet minimum quality standards established by the department through consumer interviews, review of public comments and discussions with providers of community-based services as well as other medical practitioners.
- H. Advises the local providers and contractors in interpretation and impact of state and federal regulations and policy.
- I. As part of compliance reviews, and as otherwise necessary, conducts home visits to determine adequacy of services; field complaints; educate, train or answer questions from consumers; or troubleshoot difficult programmatic issues. At times, Regional Program Officers are exposed to potentially harmful situations during these visits. Homes visited may be hazardous due to environmental concerns, hostile consumers or family members, volatile dynamics between household members, or other unpredictable dangers.

Training

25%

- A. Identifies and analyzes training needs for regional service providers and interdepartmental staff.
- B. Conceptualizes training needs based on interpretation of federal and state legislation and develops training to provide understanding and correct program delivery.
- C. Identifies, provides, and coordinates ongoing training needs to provide correct understanding and ensure correct service delivery based on system changes/updates, organizational changes and demonstrated user needs.
- D. Collaborates with and provides assistance to program officers within the bureau in providing refresher training for provider agencies.
- E. Conceptualizes ad hoc training needs and coordinates provision of training based on questions received, quality control findings, second party and quality assurance reviews, performance results, or upon request to ensure correct service delivery.
- F. Coordinates training taking into account the impact changes have on interdepartmental and intradepartmental programs using persuasive communication and negotiation skills that encompass quality customer service and SLTC Division philosophy.

- G. Ensures that training is conducted where ADA accessibility requirements are met.
- H. Researches, develops, and designs best practices training.
- I. Coordinates and provides training of new service providers.
- J. Educates family/consumers regarding their rights and choices under bureau programs.

Policy Clarification

15%

- A. Receives requests for policy clarification, analyzes and researches problems, and coordinates with other program officers as needed to respond to policy questions.
- B. Works as a team member to develop policy in response to consumer and provider needs while maintaining adherence to federal, state, and Department regulations.
- C. Reviews existing policy/procedures, collects ideas and suggestions from other agency staff and providers regarding existing and proposed policies and provides that information to central office.
- D. Serves as technical advisor to central office regarding development and revision of state policy and procedures manuals.
- E. Interprets policy based on overall understanding of program intent and goals.
- F. Disseminates policy as needed to providers, consumers and the general public.

2. Give specific examples of the types of problems solved, decisions made or procedures followed when performing the most frequent duties.

Problem solving activities include resolving complex issues which arise between individuals with disabilities and the elderly, families, Indian Nations, health care providers and other division staff. These often center around the rights of the individual/family, health care providers' internal policies and bureau, division and department policies. The bureau relies on the professional judgment of the Regional Program Officer to make decisions and find solutions to problems. Regional Program Officers make independent decisions in implementing bureau goals. Decisions made are significant and effect staff, provider agencies, contractors and clients.

Examples would include the following:

- Working with tribal authorities and various state agencies to develop short and long term services for a client in crisis who has complex medical issues and limited or no resources;
- Reviewing a provider of services and finding deficiencies which result in significant repayment requirements;
- Providing training to multiple providers on a variety of relevant topics.

3. What do you consider the most complicated part of the job?

Ensuring that people with disabilities and the elderly receive quality /quantity of services to live as independently as possible in their communities. Considering the needs of all parties and keeping positive relations with all involves a tremendous amount of finesse, negotiation skills and the ability to apply active listening and initiate constructive communication. The results of this coordinated planning often have significant impact on clients and families.

4. What guidelines, manuals or written established procedures are available to the incumbent?

Guidelines established by bureau/division. Federal guidelines. Program Policy Manuals. Administrative Rules of Montana. Regional staff assists with developing program guidelines and manual material.

5. If this position supervises other positions, complete the following information.

The number of employees supervised is 0.

List the complexity level of the subordinates. NA

Please list the Position Number for those supervised. NA

Is this position responsible for:

Hiring Firing Performance Management Promotions

Supervision Discipline Pay Level X Other: Performance
Management of Provider Organizations.

6. Please attach an Organizational Chart (optional).

SECTION III - Minimum Qualifications - List the minimum requirements for **first day** of work.

Please list the main knowledge and skill areas required for the job:

These consist of extensive knowledge of health and related services in the area of health maintenance and health promotion for people who are elderly or disabled. Working knowledge of state and federal regulations governing programs serving individuals who are elderly or disabled. Thorough knowledge of concepts and practices of consumer-directed care, issues surrounding freedom of choice, accessibility, social, psychosocial, and community impacts on consumers and their families. Working knowledge of use of computers, including Word, Excel and other software.

Skills include strong written and verbal communication skills, negotiation, mediation, problem solving and public relations to effectively represent the bureau, division or department in communicating complex and sometimes controversial issues to consumers, providers and the public.

A major skill required of this position is to synthesize diverse and sometimes conflicting information from multiple sources, make determinations about relevance and validity, assess options and alternatives and identify solutions that are directed toward meeting the health care needs of Montanans who are elderly or disabled and their families.

What behaviors are required to perform the duties? **NOTE:** Identifying behaviors used for recruitment and selection and other HR functions are part of building a competency model (see **Creating Competency Models** in Guide). A position description will provide helpful information if a model has not been developed. Often "abilities" from the current PD can be stated as desired and observable behaviors. For example, "the ability to communicate clearly in writing" can be restated "writes clearly and concisely".

Managing change; understanding personality types; active listening; conducting effective presentations; mediating and problem solving, demonstrating cultural sensitivity; using anger management and stress management techniques; distinguishing between appropriate and inappropriate humor; communicating clearly in writing and verbally; keeping positive relationship with various entities; professionally representing the bureau, division and department; analyzing regulations, laws, policies and procedures; analyzing health care needs of clients; and interpreting rules, regulations and policies.

Education and experience: Please check the one box that indicates the **minimum** educational requirements for this job, as it relates to a new employee on the **first day** of work (not the educational background of the person now in the position):

No education required training	2 year job-related college or vocational
High school diploma or equivalent	X College degree (Bachelor's)
1 year job-related college or vocational training	Post-graduate degree or equivalent (e.g. Master's, JD)

There may be a variety of fields of study that are acceptable. A Human Resource Specialist may have a Bachelor's in Human Resources, Business Administration, Public Administration or another related field. Please specify the acceptable fields of study:

Bachelors degree in behavioral science, human services, social work, family science, human development and counseling, education, public health or closely related field.

Other education, training (software), certification (CPA), or licensing (pilot, psychologist) required (please specify):

General knowledge of computer programs such as Word, Excel, e-mail and the internet.

Please check the one box that indicates the minimum amount of job-related work experience needed as a new employee on the first day of work (not the experience of the person now in the position):

No prior work experience required	3 to 4 years job-related work experience
X 1 to 2 years of job-related work experience	5 or more years of job-related work experience

Specific experience (optional): Experience working with individuals with a disability and the elderly.

This agency will accept alternative methods of obtaining necessary qualifications.

For recruiting purposes please list examples of acceptable alternative methods of obtaining those qualifications. **These examples should appear on a vacancy announcement.**

SECTION IV – Other Important Job Information

List any other important information associated with this position, such as working conditions, supervision provided or received, scope and effect and personal contact.

The individual in this position is responsible for a multi-county area and is required to travel extensively. Furthermore, continuous contact with regional health care providers and contractors to ensure compliance with program policy is an essential component of this position. The individual oversees these providers and contractors at the regional level. This includes, but is not limited to, providing training, education, doing quality assurance reviews, problem solving, mediation and crisis intervention. The position is responsible for ensuring that Montanans with disabilities and the elderly are receiving appropriate quality Medicaid long-term care services. Expected to work independently and to make appropriate decisions. There is no onsite supervision.

SECTION V – Signatures

My signature below (typed or hand written) indicates the statements in Section I to IV are accurate and complete.

Employee:

Signature	Title	Date
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Immediate Supervisor:

Signature	Title	Date
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Administrative Review:

Signature	Title	Date
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STATE OF MONTANA JOB PROFILE AND EVALUATION

The job profile is a streamlined position description and may serve as the core document for all human resource functions such as recruitment, selection, performance management and career and succession planning. It was developed, initially, for use in classifying positions in Pay Plan 020.

If you are converting a position to Pay Plan 020 and the position has not changed simply cut and paste the information needed from the current position description. The position description contains sections that are no longer used to classify the position, such as: Working Conditions and Physical Demands; Management and Supervision of Others; Supervision Received; Scope and Effect; and Personal Contacts. These may still be important to the position and may be included in **Section IV – Other Important Job Information**.

When working with a new position, classification request or change to a position in Pay Plan 020, complete the information below to provide the required documentation for classification.

SECTION I – Identification

Working Title Eligibility and Referral Specialist		Job Code Number 211235	Job Code Title Social Services Specialist
Pay Band 5	Workers Compensation Code 8744		<input type="checkbox"/> FLSA Exempt <input checked="" type="checkbox"/> FLSA Non-Exempt
Position Number 691-14398			
Department Public Health & Human Services		Division and Bureau Developmental Services	
Section and Unit Program Support Bureau		Work Address and Phone 111 Sanders PO Box 4210	
Profile Produced By Jannis Conselyea		Work Phone 444-6317	

Work Unit Mission Statement or Functional Description - This section should include a complete statement of the mission or function as it relates to the work unit.

The incumbent is responsible for determining eligibility for all adults and children applying for Developmental Disabilities Program services for the entire state of Montana. The incumbent will also be responsible for reviewing and determining compliance with policies and procedures for all state referrals for services. Including assuring referral packets are accurate for program screenings and managing all screenings for services for adults and children referred for group home placement. The incumbent will facilitate all state screenings for placement into Developmental Disabilities Services, assuring referral packets are up-dated and complete and scoring is accurate. Based on the documentation the incumbent will award supports and services to applicants. The position is a part of the Program Support Bureau which is responsible for planning, development, special project implementation, special fund solicitation, quality assurance, incident management monitoring, training, MONA oversight, rules and policy and the development and maintenance of programmatic information systems required by the Developmental Disabilities Program.

Describe the Job's Overall Purpose:
to provide a variety of program support functions.

SECTION II - Major Duties or Responsibilities	% of Time
<p>This section should be a clear concise statement of the position's duties. Well written thorough task duty statements are required here to accurately evaluate the position.</p> <p>1. What are the major duties or responsibilities assigned to this position? Group duties in order of importance and estimate the percent of time needed to perform each duty. NOTE: Because you are identifying major duties usually 3-5, the quantity of time probably will not be less than 20%. If a duty is essential but not performed routinely you should list it. For example, lobbying during the legislative session may not take up a large percent of total work time, but can be an essential duty.</p> <p>A. Determine eligibility of all applicants applying for Developmental Disabilities Program services. Review all pertinent documentation to assure individuals are eligible to be placed on the Waiting List to be screened into Developmental Disabilities Services and re-determine their eligibility as required. This position requires expertise in the use of assessment tools which are required to determine eligibility for Developmental Disabilities Services. These include the following assessment instruments: Vineland II and the ABAS. Analytical and Creative thinking skills are essential for this position in order to determine eligibility for Developmental Disabilities Services.</p> <p>B. Review all referral packets of individuals found eligible for Developmental Disabilities Services in a timely manner for completeness and accuracy .</p> <p>C. Represents the Developmental Disabilities Program in Fair Hearings relating</p>	<p>55%</p> <p>20%</p>

to Eligibility determinations and Screening Appeals. 5%

D. Manage and facilitate all state screenings for adults referred for Developmental Disabilities Program Services and children referred for group home placement. 20%

2. Give specific examples of the types of problems solved, decisions made or procedures followed when performing the most frequent duties.

A. The incumbent must review and analyze all documentation in order to make a determination or a re-determination that an individual is Developmentally delayed and meets all the state criteria for Developmental Disabilities Services. The incumbent must use critical thinking skills when determining a program applicants eligibility for services. The Incumbent must have knowledge of the state eligibility requirements, and utilize analytical and research skills. Federal funding is dependent upon assuring applicants meet all the 1915c Home and Community – based Waiver eligibility requirements. The incumbent must have a thorough understanding of assessment tools which are used by the Developmental Disabilities Program including the Vineland II and the ABAS. Eligibility determinations for services which are not accurate result in Fair Hearings which cost the Department time and money. Therefore, analysis and critical thinking skills are imperative when determining eligibility for services.

B. The incumbent must have knowledge of referral packet requirements. 1915c Waiver requirements and Developmental Disabilities Program rules, policies and procedures.

C. The incumbent will participate in all Fair Hearings that relate to eligibility determinations and Screening Appeals.

D. The incumbent will manage and facilitate all statewide screenings for adults and children referred for Children's Group Home Services by assuring the referral packets are complete, the up-date summary forms are in place and the documents are scored appropriately according to policy.

3. What do you consider the most complicated part of the job?

Assuring accuracy, organization and efficiency while applying state and federal rules and policies that govern the eligibility and referral process. The position has a gate keeping function and must determine if individuals meet the state and federal requirements for Developmental Disabilities Services.

4. What guidelines, manuals or written established procedures are available to the incumbent?

Eligibility requirements are written and established in the Administrative Rules, policy, Montana Code Annotated and in the Developmental Disabilities Program Waivers.

5. If this position supervises other positions, complete the following information. N/A

List the complexity level of the subordinates.

Please list the Position Number for those supervised

Is this position responsible for:

Hiring ☐ Firing ☐ Performance Management ☐ Promotions

☐ Supervision ☐ Discipline ☐ Pay Level ☐ Other:

6. Please attach an Organizational Chart (optional).

Incumbent reports to the Program Support Bureau Chief and the Program Director.

SECTION III - Minimum Qualifications - List the minimum requirements for first day of work.

Please list the main knowledge and skill areas required for the job:

Knowledge of service and supports required by individuals with Developmental Disabilities

Knowledge of Medicaid regulations

Knowledge of design and development of Databases.

Knowledge of tracking and record-keeping systems.

Knowledge of computer software and office equipment.

Knowledge of office policies and procedures.

Ability to communicate effectively both orally and in writing.

Ability to prioritize and complete work assignments in a timely manner.

What behaviors are required to perform the duties? NOTE: Identifying behaviors used for recruitment and selection and other HR functions are part of building a competency model (see **Creating Competency Models** in Guide). A position description will provide helpful information if a model has not been developed. Often "abilities" from the current PD can be stated as desired and observable behaviors. For example, "the ability to communicate clearly in writing" can be restated "writes clearly and concisely".

Identifies and resolves problems.

Seeks ways of making improvements to processes, methods.

Communicates clearly orally and in writing.

Demonstrates critical thinking skills

Prioritizes and organizes projects and duties and handles the most urgent ones first.

Handles conflict professionally.

Speaks respectfully and courteously to all

Follows written and verbal instructions.

Works well as a Team member.

Education and experience: Please check the one box that indicates the **minimum** educational requirements for this job, as it relates to a new employee on the **first day** of work (not the educational background of the person now in the position):

☐ No education required

☐ 3 year job-related college or vocational training

☐ High school diploma or equivalent

☒ College degree (Bachelor's)

☐ 1 year job-related college or vocational training

☐ Post-graduate degree or equivalent (e.g. Master's, JD)

There may be a variety of fields of study that are acceptable. A Human Resource Specialist may have a Bachelor's in Human Resources, Business Administration, Public Administration or another related field. Please specify the acceptable fields of study:

Special Education, Psychology, Sociology, Communications,

Other education, training (software), certification (CPA), or licensing (pilot, psychologist) required (please specify):

The incumbent should be experienced with the following software and computer programs: Outlook, Word, Word Perfect, Excel.

Please check the one box that indicates the minimum amount of job-related work experience needed as a new employee on the first day of work (not the experience of the person now in the position):

☐ No prior work experience required

☒ 3 to 5 years job-related work experience

☐ 1 to 2 years of job-related work experience

☐ 5 or more years of job-related work experience

Specific experience (optional):

☐ This agency will accept alternative methods of obtaining necessary qualifications.

For recruiting purposes please list examples of acceptable alternative methods of obtaining those qualifications. **These examples should appear on a vacancy announcement.**

SECTION IV – Other Important Job Information

List any other important information associated with this position, such as working conditions, supervision provided or received, scope and effect and personal contact.

This position is critical, without correct eligibility determinations, re-determinations, and referrals and screening management the state of Montana is at risk of being out of compliance with state and federal Medicaid requirements which in turn may jeopardize funding for the approximately 4000 adults and children currently utilizing Waiver services. Without defensible eligibility, referral and screening decisions the Department must respond to Fair Hearings which can be costly in terms of time and funding.

SECTION V – Signatures

My signature below (typed or hand written) indicates the statements in Section I to IV are accurate and complete.

Employee:



STATE OF MONTANA JOB PROFILE AND EVALUATION

SECTION I - Identification

Working Title
Developmental Waiver Specialist
Job Code Number
131916
Job Code Title
Administrative specialist
Pay Band
6
Position Number 11145

(double-click below to 'X' box)

☐ FLSA Exempt ☒ FLSA Non-Exempt

Department
Department of Public Health and Human Services
Division and Bureau
Developmental Disabilities
Section and Unit

Work Address and Phone

Profile Produced By
Jeff Sturm

Work Phone
444 2695

Work Unit Mission Statement or Functional Description

Describe the Job's Overall Purpose:

This position is responsible for ensuring the Department meets various Federal and State rule and statutory requirements, and in particular, the reporting requirements of the Centers for Medicare and Medicaid Services (CMS). CMS is the primary funding source for DDP-funded home and community based waiver services.

SECTION II - Major Duties or Responsibilities

MAJOR DUTIES:

1. Produce DD waiver applications, renewals and amendments to CMS, as required, to assist the DDP in better meeting the needs of Montanans with developmental disabilities. The position requires extensive knowledge of all waiver application procedures including the new 3.5 version and all related assurances including fiscal, quality assurance, incident management, and other performance requirements. The position requires knowledge of data collection procedures including valid sampling

techniques to assure that CMS requirements are being met.. DD system knowledge and experience is necessary in developing language that works for CMS, providers, DDP staff and service recipients as they all have differing ways and means of providing services. A state requirement of the central office may be carried out differently in the field and interpreted in yet another way by recipients. This challenge is compounded when several facets of the DD service delivery system are changed concurrently and multiple contractors are involved in these efforts. Contractors also have conflicting views regarding compliance, quality and performance. The Waiver process resolves sensitive problems by determining the relative importance of each of the contributors. 40%

2. Complete of the annual CMS 372 Reports, as required, to maintain ongoing statutory compliance with DDP's primary Medicaid funding source. Requires gathering of extensive data and other information including identifying deficiencies and preparing plans of correction for individual contracted providers, analysis of costs and utilization of waiver services, and other information that must be interpreted and analyzed to determine validity to report. These analyses are tested to determine if they accurately maintain and measure compliance 20%
3. Provide ongoing DD waiver-related technical assistance and support to provider staff, DDP field staff, DDP central office staff and others, as requested. Conduct research as needed including the use of surveys, information from other states, and analysis of "best practices" to fulfill this responsibility. Assist DDP management in decisions related to waiver amendments and new waivers. Information may include conflicting data from a variety of sources that must be evaluated to determine value to request. Develop recommendations based on the results of research. 10%
4. Perform other duties as required, in support of the mission of the Developmental Disabilities Program. Examples include providing technical support to various DDP contractors including Maximus (AWACS rewrite), Davis Deshaies (rates methodology project) and Program Designs (personal supports planning). Perform as the State's liaison with other states in disseminating information about Montana's DD waivers. Responsible for forwarding qualified provider materials to potential vendors of DDP-funded services. Train DDP and provider staff, as requested, on various CMS requirements related to the delivery of waiver services. 5%
5. Direct the statewide waiting lists for adults and children and assist DDP staff and providers in screenings, screening appeals, and work groups regarding modifications to the screening and referral processes. Provide reports as necessary on the current waiting list (had a typo here) and assist with DDP management on EPP proposals related to legislative waiting list requests. 20%
6. Provide assistance to the Developmental Disabilities Program Services Coordinator and perform all duties regarding commitments to the residential facility. This will involve generating commitment reports, coordinating the commitment review process and providing court testimony if required. 5%

1. Give specific examples of the types of problems solved, decisions made or procedures followed when performing the most frequent duties.

This position is expected to effectively either resolve, or ensure the resolution of issues or problems associated with the aforementioned activities. In cases where changes in services, spending authority or policy would result from an action (or an inaction), the waiver specialist would consult with his supervisor for decision-making. In cases where there are questions regarding the impact of a decision, the specialist would develop recommendations based on the results of research. Management would review this information and make decisions.

2. What is, in your opinion the most complicated part of the job?

This position requires staying abreast of changes taking place in CMS and in the DDP. Specifically, there is an increasing level of accountability and scrutiny attached to the use of Medicaid funds by CMS. Identifying potential areas of non-compliance with CMS requirements and working with other staff in developing effective solutions is necessary and sometimes challenging, given the complexity of systems issues. Above all, this position is responsible for ensuring that CMS audits of DDP-funded waiver services do not result in significant problems for the program.

3. What guidelines, manuals or written established procedures are available to the incumbent?

Use and interpret Administrative Rules, Code of Federal Regulations, Montana Code Annotated, DDP Policies, DDP Program Director administrative directives, DDP Handbooks, CMS State Medicaid Director letters, NASDDDS correspondence and bulletins, CMS waiver documents and application materials. In addition to interpreting information from printed materials and websites, information is accessed from CMS and NASDDDS technical staff and from conferences and teleconferences sponsored by CMS and NASDDDS.

4. If this position supervises other positions, complete the following information.

This position does not supervise others.

List the complexity level of the subordinates

Please list the Position Number for those supervised

Is this position responsible for: (double-click to "X" box)

☐ Hiring ☐ Firing ☐ Performance Management ☐ Promotions

☐ Supervision ☐ Discipline ☐ Pay Level ☐ Other:

6. Please attach an Organizational Chart (optional).

SECTION III - Minimum Qualifications - List the minimum requirements for first day of work. Please list the main knowledge and skill areas required for the job:

Strong familiarity with and understanding of how the DD service system pieces fit together is a prerequisite for this position. Familiarity with CMS requirements. DD system knowledge and experience is necessary in developing language that works for

CMS, providers, DDP staff and service recipients. This challenge is compounded when several facets of the DD service delivery system are changed concurrently and multiple contractors are involved in these efforts.

In addition to completing required DD waiver activities, a thorough understanding of the DD commitment process is required.

Strong receptive and expressive command of the English language is essential. An ability to interpret complex information is required. Requires the ability to synthesize complex written and verbal information from a variety of sources and to be able to write clearly and effectively. Requires strong organizational skills in completing required reports and documents comprised of information and data from a variety of sources. Responsible for meeting critical deadlines related to various CMS waiver requirements and DD commitments. The ability to research information and clearly present information to persons with decision-making authority is required. Should be able to work autonomously and recognize those situations in which critical feedback and assistance is necessary in achieving the goals of the Program and Department.

What behaviors are required to perform the duties?

LOYALTY AND DEDICATION TO ORGANIZATION(CMT110)

Adheres to organizational goals and the tasks at hand. Aligns actions and activities with the needs and goals of the organization.

Behaviors

- Helps and supports fellow employees in their work to contribute to overall organizational success
- Is aware of position as it relates to the needs of the state of Montana
- Exhibits a sense of ownership in a project or the resolution of a problem
- Makes decisions that benefit the organization even if the decisions are unpopular
- Looks for opportunities for improving work methods and outcomes to the overall benefit of the organization
- Actively seeks to identify and remove barriers which block change and impede organizational success

RELIABLE AND DEPENDABLE (CMT140)

Reliable and dependable in performing job-related tasks.

Behaviors

- Follows through and meets commitments and agreements in a timely manner
- Relied upon by others as a source for valid information
- Maintains a consistent and predictable schedule
- Comes to work on time
- Demonstrates a good attendance record
- Can be counted on to meet deadlines

RELATIONSHIP BUILDING (INF120)

Builds short- and long-term relationships with people critical to work and project success. Relationships involve all those encountered at work. Is respected as a valid resource through consistent actions and behaviors. Builds relationships by bringing conflicts and disagreements into the open, as appropriate. Makes appropriate or acceptable compromises in order to meet goals and to gain cooperation from others.

Behaviors

- Honors commitments and agreements
- Develops relationships and acts as a trusted advisor
- Treats people fairly, with courtesy and respect
- Earns recognition and respect
- Recognized as being highly credible
- Treats others in a positive and consistent manner
- Demonstrates a willingness to collaborate in order to meet goals or to gain cooperation from others

PRIORITIZING, MULTI-TASKING, BALANCING MULTIPLE PROJECTS (INA131)

Recognizes or establishes the relative importance of multiple issues, tasks, and opportunities to maximize the productivity of the organization.

Behaviors

- Prioritizes tasks and handles the most urgent ones first
- Uses time wisely
- Handles multiple tasks and projects simultaneously without jeopardizing quality
- Remains aware of workload; makes appropriate adjustments to meet deadlines and complete tasks
- Adapts time and resources in proportion to the importance of the task

QUALITY, ACCURACY, ATTENTION TO DETAIL (INA132)

Achieves excellent work results by attending to details. Demonstrates an appropriate level of precision to complete projects successfully and to execute job responsibilities in a timely manner.

Behaviors

- Reviews work to ensure accuracy, completeness and quality
- Pays attention to the specifics of the situation or issue at hand
- Understands the purpose or goal and follows-through to completion of the task
- Takes action or responds in a timely and accurate fashion
- Follows appropriate procedures without taking shortcuts, when required
- Conscientious; double checks and monitors work; self-evaluates

RESULTS ORIENTED (INA133)

Achieves goals and brings projects to completion. Investigates, calculates and proceeds through a project or task to bring about a conclusion. Persists and stays focused when faced with a series of challenging or uncertain situations. Demonstrates a concern for working well or for competing against a standard of excellence.

Behaviors

- Sets realistic goals with specific objectives
- Consistently completes tasks or projects so that customer expectations and organizational requirements are exceeded
- Maintains focus on the achievement of established goals or solutions
- Investigates and proceeds to a beneficial or tangible conclusion of a project or task
- Handles interruptions or distractions and stays on task
- Maintains focus and effectiveness during change or transition

Education and experience: Please check (double-click) the one box that indicates the **minimum** educational requirements for this job, as it relates to a new employee on the **first day** of work (not the educational background of the person now in the position):

- | | |
|--|---|
| <input type="checkbox"/> No education required | <input type="checkbox"/> 2 year job-related college or vocational training |
| <input type="checkbox"/> High school diploma or equivalent | <input checked="" type="checkbox"/> College degree (Bachelor's) |
| <input type="checkbox"/> 1 year job-related college or vocational training | <input type="checkbox"/> Post-graduate degree or equivalent (e.g. Master's, JD) |

Please specify the acceptable fields of study:

Human Services Related field

Other education, training (software), certification (CPA), or licensing (pilot, psychologist) required (please specify):

Please check (double-click) the one box that indicates the minimum amount of job-related work experience needed as a new employee on the first day of work:

- | | |
|--|--|
| <input type="checkbox"/> No prior work experience required | <input checked="" type="checkbox"/> 3 to 4 years job-related work experience |
| <input type="checkbox"/> 1 to 2 years of job-related work experience | <input type="checkbox"/> 5 or more years of job-related work experience |

Specific experience (optional):

Developmental Disabilities system

☐ This agency will accept alternative methods of obtaining necessary qualifications. Examples include:

SECTION IV – Other Important Job Information

SECTION V – Signatures

My signature below (typed or hand written) indicates the statements in Section I to IV are accurate and complete.

Employee:

Signature

Title

Date

Immediate Supervisor:

Signature

Title

Date



STATE OF MONTANA JOB PROFILE AND EVALUATION

SECTION I - Identification

Working Title

Quality Improvement Specialist

Job Code Number

211236

Job Code Title

Human Services Specialist

Pay Band

6

Position Number

Region I - 51503 Region II - 51579; Region III - 51868 ; Region IV -51838; Region V -51552

☐ FLSA Exempt ☒ FLSA Non-Exempt

Department

Public Health and Human Services

Division and Bureau

Disability Services Division/Developmental Disabilities Program/Community Services Bureau

Section and Unit

Regional Offices

Work Address and Phone

Region I - Glasgow, Miles City; Region II - Great Falls; Region III - Billings; Region IV - Helena, Butte, Bozeman; Region V - Missoula, Kalispell

Profile Produced By

Work Phone

Regional Managers on 2/22/2006 Reg. I 228-8264, II 454-6091, III 655-7602, IV 444-1717, V 329-5425

Work Unit Mission Statement or Functional Description

There are five Regional Offices within the Developmental Disabilities Program and each is responsible within its geographic area for procuring and supporting community based services for people with developmental disabilities and/or their families. This is accomplished by determining eligibility for services, making referrals, selecting referred individuals, planning individualized supports, and monitoring contracted providers to ensure the quality of service delivery. In conjunction with the Central Office, the Regional Office is also responsible for developing and expanding services based on assessment of unmet needs. Regional Offices negotiate and manage contracts both financially and programmatically with community service providers. The regional office manages service authorizations and individual funding allocations for service recipients. Regional Office staff provide technical assistance to contracted providers

and provide community education. The Regional Office interprets Rules and Regulations, provides clear and accurate policy direction and guidance to contracted providers, maintains Medicaid Waiver funding requirements, and ensures compliance with the Federal Omnibus Budget Reconciliation Act of 1987, Nursing Home Reform.

Describe the Job's Overall Purpose:

This position is responsible for determining eligibility for program resources. The position also interprets and ensures the implementation of Department Rules and Policies, maintains Medicaid Waiver funding requirements, conducts ongoing program compliance/and quality assurance reviews.

The person in this position must have extensive knowledge about assigned corporations, their staff, and the people being served. He/she must identify strengths and weaknesses within the corporation in order to plan service modifications or to provide technical assistance or training. He/she evaluates corporation services using both formal and informal methods, assists in the design of corrective action plans, and participates where needed in finding solutions to problem areas. The Quality Improvement Specialist (QIS) is a front line staff person who advises corporation staff on client and service issues, secures information, provides training or other types of technical support, and provides consultation or hands-on assistance to meet specific corporation or client needs.

The person in this position is responsible for managing a complex process for entrance into community-based services and nursing facilities for persons suspected of having a developmental disability. Major goals are to assure that appropriate placements are made, that the process is fair and defensible, that the people selected are those with the most significant need for those services, and that Federal and State regulations are followed. The person must know the needs and characteristics of individuals waiting for services so that they can provide information and advice to plan for future expansion. This person provides information on developmental disabilities and services to other agencies and community groups and generally promotes public participation in the design, development, and provision of services and other support opportunities for people with developmental disabilities, in accordance with the guidelines for those programs.

Implements the incident management system within the region by performing the following duties: staffing and conducting critical incident investigations, reviewing contractor investigations, participating in contractor incident management meetings, monitoring trends, and responding to investigation findings and trends.

SECTION II - Major Duties or Responsibilities

% of Time

1. What are the major duties or responsibilities assigned to this position?

Quality Assurance

20%

Monitors the quality of services provided by regional contractors and compliance with rules and policies to insure health, safety, and quality of life for service recipients by performing on site visits, completing ongoing/annual evaluations, and reviewing a wide variety of documentation.

Incident Management**35%**

Monitors and responds to incidents by staffing and conducting critical incident investigations, reviewing contractor investigations, participating in contractor incident management meetings, monitoring trends, and responding to investigation findings and trends to prevent future occurrences.

Service Entry/Exit**20%**

Determine eligibility, approve referrals for placement on the waiting list, manage the waiting list and regional screenings to select recipients for limited service opportunities by applying the state rules, policies and guidelines to individual intake /referral information. Intervene on behalf of individuals identified for exit from services by troubleshooting crisis situations with the personal support planning team.

Training and Technical Assistance**10%**

Interpreting policies and guidelines, assisting in development of behavior support plans and provide training as mutually agreed upon with provider agencies to correct noted deficiencies. Administers and corrects Medication Administration certification tests.

Funding**15%**

Complete and maintain waiver funding eligibility for all individuals enrolled in waiver services and participate in the development and authorization of individual funding allocations by completing annual level of care determinations, reviewing service plans and working with teams to develop individual cost plans.

2. Give examples of the types of problems solved, decisions made or procedures followed when performing the most frequent duties.

Conducts ongoing evaluation of services and completes the quality assurances process to document health, safety and quality of service issues as well as to recommend solutions to these issues.

Conducts investigations of emergency hospitalizations and/or deaths and documents results. Conducts investigations of other situations as assigned.

Manages selection of recipients for all service opportunities from a large group of eligible individuals.

Explaining the requirements of laws, rules, policies and procedures.

Completing the required waiver forms on each recipient annually.

3. What is, in your opinion, the most complicated part of the job?

Intervening in a wide variety of crisis situations that may be contentious and complex, investigation of deaths and other critical incidents, applying rules, policies, and procedures within an environment of systems change.

4. What guidelines, manuals or written established procedures are available to the incumbent?

MCA, ARM, CMS waivers, DPHHS and DDP policies and procedures, Referral, QA, Community Supports, Qualified Provider, Eligibility, Child and Family Service, DDCPT, medication certification manuals, porting guidelines and management memos.

5. If this position supervises other positions, complete the following information.

The number of employees supervised is 0

List the complexity level of the subordinates na

Please list the Position Number for those supervised na

Is this position responsible for: na

☐ Hiring ☐ Firing ☐ Performance Management ☐ Promotions

☐ Supervision ☐ Discipline ☐ Pay Level ☐ Other:

6. Please attach an Organizational Chart (optional).

SECTION III - Minimum Qualifications - List the minimum requirements for **first day** of work.
Please list the main knowledge and skill areas required for the job:

Knowledge of services and supports required by individuals with developmental disabilities.

Ability to communicate effectively both orally and in writing, to train, provide direction, persuade, recommend, coordinate, and inform service providers, management, and other professionals within State, Federal, and private agencies concerning programmatic issues of programs.

Considerable knowledge of the principles and practices of provider training and development and the ability to instruct adult learners.

Ability to work under stressful, sometimes confrontational conditions using tact and professionalism.

Ability to recognize, analyze, and solve complex programmatic problems and arrive at sound conclusions and decisions. Ability to know when to seek advice and direction from the Department's Office of Legal Affairs.

Ability to plan, implement, and evaluate the achievement of program goals and objectives as well as the resources used to obtain them.

Ability to establish and maintain effective working relationships with a wide variety of management, professional staff, the public and consumers and their families.

Knowledge of the concepts and practices of group mediation, consensus building and problem resolution.

Ability to work under minimal supervision.

What behaviors are required to perform the duties?

Education and experience: Please check the one box that indicates the **minimum** educational requirements for this job, as it relates to a new employee on the **first day** of work (not the educational background of the person now in the position):

- | | |
|--|---|
| <input type="checkbox"/> No education required | <input type="checkbox"/> 2 year job-related college or vocational training |
| <input type="checkbox"/> High school diploma or equivalent | <input checked="" type="checkbox"/> College degree (Bachelor's) |
| <input type="checkbox"/> 1 year job-related college or vocational training | <input type="checkbox"/> Post-graduate degree or equivalent (e.g. Master's, JD) |

Please specify the acceptable fields of study:

Other education, training (software), certification (CPA), or licensing (pilot, psychologist) required (please specify):

Please check the one box that indicates the minimum amount of job-related work experience needed as a new employee on the first day of work:

- | | |
|--|--|
| <input type="checkbox"/> No prior work experience required | <input checked="" type="checkbox"/> 3 to 4 years job-related work experience |
| <input type="checkbox"/> 1 to 2 years of job-related work experience | <input type="checkbox"/> 5 or more years of job-related work experience |

Specific experience (optional):

Prefer at least two years of the work related experience be in the field of service for people with developmental disabilities.

☐ This agency will accept alternative methods of obtaining necessary qualifications. Examples include:

SECTION IV – Other Important Job Information



STATE OF MONTANA JOB PROFILE AND EVALUATION

The job profile is a streamlined position description and may serve as the core document for all human resource functions such as recruitment, selection, performance management and career and succession planning. It was developed, initially, for use in classifying positions in Pay Plan 020.

If you are converting a position to Pay Plan 020 and the position has not changed simply cut and paste the information needed from the current position description. The position description contains sections that are no longer used to classify the position, such as: Working Conditions and Physical Demands; Management and Supervision of Others; Supervision Received; Scope and Effect; and Personal Contacts. These may still be important to the position and may be included in **Section IV – Other Important Job Information**.

When working with a new position, classification request or change to a position in Pay Plan 020, complete the information below to provide the required documentation for classification.

SECTION I – Identification

Document date: 10/26/2010

Working Title Community Program Officer		Job Code Number	Job Code Title
Pay Band 6	Workers Compensation Code 8744	<input type="checkbox"/> FLSA Exempt <input checked="" type="checkbox"/> FLSA Non-Exempt	
Position Numbers 691- 31701, 31702, 31703, 31704, 31705			
Department Public Health and Human Services		Division and Bureau Addictive and Mental Disorders Division Mental Health Services Bureau	
Section and Unit		Work Address and Phone	
Profile Produced By Lou Thompson		Work Phone 406.444.9657	

Work Unit Mission Statement or Functional Description -

The Addictive and Mental Disorders Division is the State mental health authority and is responsible for management of the State's system of publicly funded adult mental health and adolescent and adult chemical dependency services.

The Mental Health Services Bureau is responsible for the development, implementation, operation, oversight, evaluation and modification of the State's system for delivering and reimbursing publicly funded non-institutional mental health services for adults with severe disabling mental illness. Supporting the development of quality mental health services that foster independence, dignity, contain costs and provide options to consumers. This requires development, maintenance and revision of administrative rules, policies, procedures and

systems necessary to ensure the availability and efficient delivery of appropriate and effective services. It also requires extensive monitoring and oversight of program implementation and operation, and analysis and reporting of program operations, costs and outcomes.

Describe the Job's Overall Purpose:

This position is responsible for developing, fostering, and supporting collaborative relationships between the Mental Health Services Bureau, community stakeholders, consumers, providers, local and tribal government, Local Advisory Councils, and the Service Area Authorities. The CPO is charged with providing the "Home and Community Based Service Waiver" with development and support, acting as the focal point for a responsive system of mental health care by meeting the technical assistance needs of individuals and service providers who implement the programs of this bureau. The incumbent is responsible for regional implementation of a variety of community based health programs.

SECTION II - Major Duties or Responsibilities	% of Time
<p>A. Liaison between the Mental Health Services Bureau and community providers, stakeholders, and consumers across the state. (70%)</p> <ol style="list-style-type: none"> 1) Represent the Division and the Mental Health Services Bureau in the community by providing consultation, leadership, and direction on programs to providers, stakeholders and consumers 2) Facilitate and support the planning, development, implementation, and evaluation of community mental health services by working with community stakeholders, agencies, and groups. 3) Identify unmet needs within the public mental health system. 4) Research problems and coordinate with central office staff and other program officers as needed to respond in a timely and accurate way. 5) Implement bureau response to federal and state audit review and programmatic review recommendations. 6) Assist with the implementation and provide oversight of Medicaid HCBS -SDMI waiver in designated regions. 7) Communicate with Waiver providers monthly, meet with Waiver teams weekly, ensure that Waiver teams stay within annual budgets and obtain appropriate providers as necessary. 8) Conduct levels of care for waiver consumers as requested. 9) Review and approve initial and annual Plans of Care and the Cost Sheets for waiver recipients. 10) Serve as a point of contact and resource to individuals, agency staff and providers. 11) Perform a wide range of tasks assisting and educating consumers, informing consumers about community and other natural supports. (i.e. Peer to Peer trainings, Family to Family trainings, Recovery International meetings and Wellness Recovery Action Plan (WRAP) trainings). 12) Support consumers in effectively integrating into the community. 13) Collaborate with other divisions and state agencies at community level. 14) Support providers, consumers and other state agencies through collaborative mediation, consensus building and conflict resolution. 15) Manage and provide oversight for community grants awarded by MHSB. 	

- 16) Monthly Waiver and CPO contact logs will be submitted to the program supervisor by the 10th day of the following month.
- 17) Maintain a working knowledge of current trends and developments in the mental health field.

B. Quality Assurance (20%)

- 1) Collaborate with Local Advisory Councils and the Service Area Authorities and participate in planning, coordination, operation and monitoring of mental health services in the community.
- 2) Utilize tools and up to date research to evaluate the impact of various programs in order to realize improved efficiency and client outcomes.
- 3) Based on programmatic reviews and evaluations, recommends policy or procedural changes to program managers and bureau chief.
- 4) Assess Waiver teams on an annual basis using identified quality assurance measures which includes desk audits.
- 5) Complete annual visits and ensure consumers' health and safety. Review all Serious Occurrence Reports and ensure follow-up. Submit quarterly reports on waiting lists as appropriate.
- 6) As part of compliance reviews, and as otherwise necessary, conducts home visits to determine adequacy of services; field complaints; educate, train or answer questions from consumers; or troubleshoot difficult programmatic issues. At times, Community Program Officers are exposed to potentially harmful situations during these visits. Home visits may be hazardous due to environmental concerns, hostile consumers or family members, volatile dynamics between household members, or other unpredictable dangers.

C. Training (10%)

- 1) When identified through quality assurance reviews, conduct specialized training, or set up specialists to conduct trainings, to provide correct understanding and ensure correct service delivery based on system changes/updates and other activities specific to the provider and/or Waiver team needs.
- 2) Identify, analyze and formalize training opportunities for all stakeholders.
- 3) Provide training and information regarding evidence based programs, best and promising practices. Facilitate public forums or meetings to gather and present information and resources related to AMDD programs and services.
- 4) Coordinate and provide training and orientation for new service providers.

2. Give specific examples of the types of problems solved, decisions made or procedures followed when performing the most frequent duties.

Provide technical assistance and training on AMDD initiatives to local stakeholder groups and serve as information source/liaison for AMDD.

Have consistent contacts with consumers, family members, providers, local officials, law enforcement, public health departments, and other stakeholders involved in the public mental health system. Facilitate effective networking and participation in planning and strengthening community mental health crisis services. Identify opportunities to leverage

resources and maximize mental health service capabilities within the community.

Work closely with community providers, consumers and stakeholders in the development and implementation of new programs and services. Work to strengthen collaboration between community based services, tribal government, the Montana State Hospital, Montana Mental Health Nursing Care Center, Montana Chemical Dependency Center and correctional facilities to improve transitions from an institutional setting to a supportive community setting. Assist in the developing of a recovery focused mental health system with necessary supports to maintain community placement and diversion from institutional facilities.

Facilitate consumer involvement in public mental health service planning through community education, identify resources and by encourage participation in local advisory councils and community groups.

Assist with the collaborative mediation of disputes between providers, consumers, and other state agencies.

3. What do you consider the most complicated part of the job?

This position requires extensive knowledge, skill and experience in the public mental health system and related human services. A thorough knowledge of the state's Medicaid and waiver rules, and how they apply to varying community and facility based mental health situations. A thorough understanding of the principles and practices of behavioral health, treatment modalities, evidence based and promising practice's, consumer initiatives, community organizing, the programs and policies of other related agencies that work with individuals with mental illness. This position also requires a working knowledge of the variety of available services within each unique community. The incumbent must have the ability to communicate and work well with consumers, family members, providers, local officials and mental health advocates. The incumbent must also have the ability to assess options and priorities, integrate planning activities with budget oversight, outcome and performance measurement, and quality management and improvement.

4. What guidelines, manuals or written established procedures are available to the incumbent?

Administrative Rules of Montana, Department policies, Montana Code Annotated, directories, Medicaid manuals, Medicaid Waiver manuals, Resource material on evidence based practices, promising practices and AMDD other initiatives.

5. If this position supervises other positions, complete the following information.

The number of employees supervised is ____.

List the complexity level of the subordinates ____.

Please list the Position Number for those supervised: _____.

Is this position responsible for:

- ☐ Hiring ☐ Firing ☐ Performance Management ☐ Promotions
- ☐ Supervision ☐ Discipline ☐ Pay Level ☐ Other: training;
schedules workload; recommendations for performance appraisal

6. Please attach an Organizational Chart (optional).

SECTION III - Minimum Qualifications - List the minimum requirements for **first day** of work.

Please list the main knowledge and skill areas required for the job:

- General knowledge of public mental health and related human services fields, including evidence based best practice models and approaches.
- General experience in the design, implementation, and facilitation of planning processes in the human services field.
- Experience engaging and facilitating effective participation of consumers, families and other stakeholders in planning activities.
- General understanding of other systems related to public mental health, including education, justice and corrections, substance abuse, vocational services, affordable housing resources, public benefits, and other related systems and resources of interest to mental health consumers and the public mental health system.
- Understanding of the principles and practices of managed behavioral health systems of care.
- Knowledge of Medicaid, Medicaid Waiver and other funding sources relevant to public mental health services and systems.
- Substantial skill in organizing, sequencing, monitoring and follow up.
- Strong ability to gather, synthesize, and interpret data necessary for state and regional planning processes.
- Strong ability to understand and adapt best practice information and related guidance from other jurisdictions for use in the public mental health system.
- Ability to integrate planning activities with stakeholders' policy and procedure design, budget oversight, outcome and performance measurement, and quality management & improvement.

What behaviors are required to perform the duties?

- This position requires a strong ability for self-direction and independent work.
- Demonstrated success and ability to work and communicate well with mental health consumers and their families, providers, and advocates.
- Ability to lead and facilitate disparate participants (i.e., consumers, families, providers, local officials, advocates, community leaders, etc.) in assessing options and reaching consensus on priorities and strategies.
- Ability to identify issues and problems that affect the public mental health system.
- Ability to conceptualize goals and statewide strategies, and translate these into regional and local priorities and action steps.
- Excellent communication skills while interacting with all stakeholders.

Education and experience: Please check the one box that indicates the **minimum** educational requirements for this job, as it relates to a new employee on the **first day** of work (not the educational background of the person now in the position):

- | | |
|--|---|
| <input type="checkbox"/> No education required | <input type="checkbox"/> 2 year job-related college or vocational training |
| <input type="checkbox"/> High school diploma or equivalent | <input checked="" type="checkbox"/> Bachelor's degree |
| <input type="checkbox"/> 1 year job-related college or vocational training | <input type="checkbox"/> Post-graduate degree or equivalent (e.g. Master's, JD) |

There may be a variety of fields of study that are acceptable. Please specify the acceptable fields of study:

Position requires a bachelor's degree in human services, behavioral health, or a closely related field. (may specify acceptable fields).

Other education, training (software), certification (CPA), or licensing (pilot, psychologist) required (please specify):

Must have a valid driver's license

Please check the one box that indicates the minimum amount of job-related work experience needed as a new employee on the first day of work (not the experience of the person now in the position):

- | | |
|---|---|
| <input type="checkbox"/> No prior work experience required | <input type="checkbox"/> 3 to 4 years job-related work experience |
| <input checked="" type="checkbox"/> 1 to 2 years of job-related work experience | <input type="checkbox"/> 5 or more years of job-related work experience |

Specific experience:

Position requires two years of recent work experience in community social or health related fields with demonstrated knowledge of community resources or mental health.

☐ This agency will accept alternative methods of obtaining necessary qualifications.

For recruiting purposes please list examples of acceptable alternative methods of obtaining those qualifications. **These examples should appear on a vacancy announcement.**

SECTION IV – Other Important Job Information

List any other important information associated with this position, such as working conditions, supervision provided or received, scope and effect and personal contact.

The position requires extensive travel, the ability to work and make decisions independently. Travel is approximately 50 - 75% of the time, includes local, regional and statewide destinations, often requiring overnight accommodations. The need to manage decisions that impact others in the context of limited resources frequently creates a high level of physical and emotional stress.

This position has responsibility to foster and support relationships between the Mental Health Services Bureau, community stakeholders, consumers, providers, local government, Local Advisory Councils, and Service Area Authorities. The incumbent makes significant program decisions and interpretations that have far-reaching effects on staff, providers and consumers within the region.

The incumbent's decisions significantly affect policy application of services provided to Montana Medicaid beneficiaries. Errors in policy or program training and guidance will contribute to providers applying incorrectly interpreted policy that will result in incorrect services or the denial of essential services to eligible persons. Such errors would be multiplied since this position is responsible for training and advising staff/providers in these policies.

The employee makes independent decisions as required to assess and plan for the development and implementation of training goals identified by the central office. Poor decisions or inappropriate commitments may result in costly errors and possible federal fiscal and administrative sanctions against the state, poor relations with the outside agencies, the public, and providers, possible legal action against the agency, inefficient use of agency resources, and direct impact on clients.